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PTO/SB/17 (12-04) Approved for use through 07/31/2008, OMB 0551-0032

Fees pursuant to the Connoidertal Agencedations Act 2005 (H.R. 4818). FEE TRANSMITTAL FOR FY 2005 Application Number 10/789,685 Tiling Date 2727/2004 First Named Inventor Jered Donald Assherim TOTAL AMOUNT OF PAYMENT (\$) 1,970.00 METHOD OF PAYMENT (Check all that apply) Check Credit Card Money Order None Other (pleuse identify); Check Credit Card Money Order None Other (pleuse identify); Charge free(s) indicated below Credit and the apply Order Agency authorized to: (check all that apply) Charge free(s) indicated below Credit card internation of the apply Charge free(s) indicated below Credit card internation on PTO-2038. WARDINING Information on his form may become public. Credit and Information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card information should not be Included on this form. Provide credit card inf	Under the Pane	work Reducti	on Act of 199	5 no persons are requ	ilred to n	U.S. Patt Repond to a collect	tion of info	mation u	Office; U.S. DEPA nless it displays a	RTMENT : Valid OMF	OF COMMER(
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Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 1.970.00 Attorney Docket No. MS1 1067USC1	I LE INANSIVII I AL					Filing Date	-	2/27/2004					
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Application Number: 10/789.685

Filing Date: 2/27/2004

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- 3. Request for Continued Examination
- 4. Information Disclosure Statement
- 5. PTO Form 1449

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